



Oxford University Hospitals
NHS Foundation Trust

Restraint – Your Right to Know

Information for patients



Why am I reading this?

In November 2018 the Mental Health Units (Use of Force) bill was made an Act of Parliament, this means that **by law** we must provide information on your rights in relation to use of force by staff working in your unit or ward.

We must also appoint a person who is directly responsible for ensuring that we follow this law.

They are known as the **'responsible person'**. The responsible person for Oxford University Hospitals NHS Foundation Trust is the Chief Nursing Officer.

Receiving this leaflet **does not mean** that we are planning to use restraint during your stay.

A member of staff will talk through any concerns you may have as a result of receiving this leaflet or answer any questions you may have.

This guide tells you about

- What restraint involves and when it may and may not be used.
- How you can expect to be treated if restraint is used.
- Actions you may wish to take.
- Support for you if you have been restrained; if you witness an incident of restraint or hear about a distressing incident.

What is restraint?

Physical restraint means the use of techniques that staff are trained to use which involves some degree of direct force to try to limit or restrict your movement.

You may be restrained while you are standing, sitting on a chair or sofa. Restraint can also be used on the floor or on a soft mattress.

Staff will always try to avoid using restraint on the floor and will never intentionally force you onto the floor in a prone position (face down).

Restraint is mainly used to restrict your arms but may also be used to limit the movement of your head and legs in situations where the risk is very high.

When you first arrive you can discuss with a member of staff what physical restraint means, the physical restraint methods that are used, and you will be consulted about aspects of your care which may affect restraint, e.g., you do not like to be touched or you have a medical condition.

When might restraint be justified?

Restraint may be used if there is no other way to stop you from seriously harming yourself or someone else and urgent action is needed. It may also be needed to give you essential treatment safely and lawfully.

When is restraint not justified?

Restraint should never be used:

- As a threat to control your behaviour (coercion).
- As a punishment for something you say or do.
- If what you say or do does not pose a real threat to your safety or to those around you.
- To save staff time; your care is best carried out through communication and effective treatment.

What will happen if I am physically restrained?

Restraint procedures should only be used by staff who have been trained in both restrictive and non-restrictive methods of intervention.

You and your relatives should always be able to ask how staff are trained and what that training involves or can email us at PALS@ouh.nhs.uk for more information.

During any restraint there will be one staff member who is there to talk to you and explain what is happening.

The only reason that you may not get this information is if this will make your condition worse or make the restraint last much longer.

Staff will always respond to your concerns and are trained to avoid any positions that could prevent you from breathing normally.

Restraint can be uncomfortable and frightening but you should never be in any pain. Staff are trained to ensure that no pain is caused.

Restraint will never continue longer than is necessary and staff will stop holding you as soon as they can.

Within 10 minutes of beginning restraint, staff may need to consider using medication if you are not able to stop significantly harmful behaviour on your own.

This is because using restraint for too long can be dangerous for everyone involved.

Use of Advance Statements

Staff should consider your past and present wishes. The best way to do this is to have an advance statement. Writing an advance statement during a period of mental wellbeing is a good way for you to plan for possible future treatment. You can talk about this with a professional or advocate that you trust who can advise you.

What happens when the restraint has ended?

After the restraint has ended and when you feel ready, staff will talk to you about considering your point of view and try to understand what happened.

- We will ask how you are feeling.
- We will try to learn from what has happened so restraint can be avoided in future.
- We will provide physical and emotional support.
- We will document exactly what happened and include your views.
- We will inform your relatives and carers if we have your permission to do so.
- We will support you to contact an advocacy worker or make a complaint if you wish to (contact details are also provided on the back page of this leaflet).

Your right to complain

Restraint is a last resort and is not an automatic response to anger or distress.

If you have any concerns about the treatment you have received, you have the right to complain.

You may also wish to seek support from an independent advocate who can help you express your views and concerns.

If you are still unhappy with the response, you can contact PALS (see the following contact details) or you have the right to make a formal complaint to the hospital managers.

What support is available for me if I am restrained or if I see or hear an incident of restraint?

We know that being restrained can be frightening, potentially dangerous and undignified.

We recognise that;

Using restraint affects everyone involved and that is why you will always be offered someone to talk about your experience after the event.

If you **witness an incident** and are upset or worried about what you have witnessed, please approach a member of staff who can offer reassurance and support.

You may also wish to speak with someone to answer any questions or concerns you have after reading this leaflet.

Contact us

Oxford University Hospitals NHS Foundation Trust

Switchboard: 0300 304 7777

Website: www.ouh.nhs.uk

Patient Advice and Liaison (PALS)

Telephone: 01865 221 473

Email: PALS@ouh.nhs.uk

POhWER Advocacy

Telephone: 0300 456 2370

Email: oxfordshireadvocacy@pohweer.net

The Advocacy People

Telephone: 0330 440 9000

Email: info@theadvocacypeople.org.uk

Please contact us if you would like the information in another language or different format.

Arabic يُرجى الاتصال بنا إذا كنتم ترغبون في الحصول على المعلومات بلغة أخرى أو بتسبيق مختلف.

Bengali আপনি এই তথ্য অন্য ভাষায় বা আলাদা আকারে পেতে চাইলে অনুগ্রহ করে আমাদের সাথে যোগাযোগ করুন।
Urdu اگر آپ یہ معلومات دیگر زبان یا مختلف فارمیٹ میں چاہتے ہیں تو برائے مہربانی ہم سے رابطہ کریں۔

Chinese 若要以其他語言或格式提供這些資訊，請與我們聯繫

Polish Aby uzyskać informacje w innym języku lub w innym formacie, skontaktuj się z nami.

Portuguese Queira contactar-nos se pretender as informações noutra idioma ou num formato diferente.

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

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